PTO/SB/06 (08-03)

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Le lo 05 PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Opcket Number			
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY		OTHER THAN SMALL ENTITY		
	FOR	NUME	NUMBER FILED NUM		ER EXTRA		RATE FEE		1	RATE		
BASIC FEE (37 CFR 1.16(a))				- Homoen extra			5	1	KAIE	· FEE		
TOTAL CLAIMS (37 CFR 1.16(c)) 17 minus 20 =					21	1	x s •	 	OR		 •	
INDEPENDENT CLAIMS 2						1			OR	× 5 <u> </u>	 	
(37 CFR 1.16(b)) 3- minus 3							X \$ =		OR	× 5=	 	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(6))							+ S:	<u> </u>	OR	+ 5 =		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	OR	TOTAL	L	
CLAIMS AS AMENDED - PART II												
		40-1		(Column 2)				OR	OTHER	R THAN		
<u> </u>		(Column 1) CLAIMS		HIGHEST	(Column 3)	1	SMALL E	ENTITY	1	SMALL	ENTITY	
N T A		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE .	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ENDMENT	Total (37 OFR 1.16(c))		Minus	••	-		× s 25 =		OR	× 50 .	766	
EN	Independent (37 CFR 1,16(b))		Minus	***	-		x s 100=		OR	,,20Q		
AM	FIRST PRESENT	FATION OF MULTIPL	E DEPEND	ENT CLAIM (37 CF	R 1.16(d))		+5 180-		OR	+360		
	•	,		_	•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
		(Column 1)		(Column 2)		`						
NT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
ME	Total G7 CFR 1.16(cf)	-	Minus	**	= .	ı	×,25.	,	OR	x s 5 0=	FEE	
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AMENDMENT		ATION OF MULTIPLE	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))	ı	+ 5 180=		OR OR	+36Q		
	 					L	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Catumn 3)							
ပ		CLAIMS '		HIGHEST		ſ						
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ENDMENT	(37 CFR (.15(c))		Minus	•••		ŀ	^		OR	200		
AME	(37 GFR 1.16(b))	<u> </u>				ŀ	x s 100.		OR			
M	FIRST PRESENT	ATION OF MULTIPLE	L	+ 180=		OR	. 360.					
							ADD'L FEE		OR	TOTAL ADD'L FEE		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".												
•••	" If the "Highest I	Number Previously	Paid For	IN THIS SPACE	s less (han 3, er	vler '	·3·.					

""If the Highest Number Previousty Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for rebusing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEE

X\$18=

X80=

+270=

ADDIT, FEE

TOTAL

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 **CLAIMS AS FILED - PART I** OTHER THAN **SMALL ENTITY** TYPE [(Column 1) (Column 2) OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE BASIC FEE NUMBER FILED NUMBER EXTRA **BASIC FEE** 355.00 710.00 FOR OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = 80 X80= X40= OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL **TOTAL** OR **CLAIMS AS AMENDED - PART II OTHER THAN** OR **SMALL ENTITY** SMALL ENTITY (Column 3) (Column 1) (Column 2) CLAIMS HIGHEST ADDI-ADDI-PRESENT REMAINING NUMBER TIONAL RATE TIONAL RATE **PREVIOUSLY** AFTER **EXTRA AMENDMENT** FEE FEE AMENDMENT PAID FOR X\$18= X\$ 9= **Total** Minus OR Minus Independent X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL OR ADDIT. FEE ADDIT. FEE 12/17/01 (Column 1) (Column 2) (Column 3) HIGHEST **CLAIMS** ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **PREVIOUSLY AFTER EXTRA** AMENDMENT FEE FEE AMENDMENT PAID FOR Minus X\$18= Total X\$ 9= OR Independent Minus X80= X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL TIONAL RATE PREVIOUSLY RATE AMENDMENT **EXTRA AFTER**

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

AMENDMENT

Minus

Minus

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PAID FOR

Total

Independent

OR

OR

OR

OR

FEE

X\$ 9=

X40 =

+135=

ADDIT. FEE

TOTAL

Application or Docket Number

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CLAIMS		D - PART (mn 1)	(Column	2)	SMA TYP	LLE	YTITY	01	ОТН	ER THA
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FOR	NUMBER FILED		NUMBER E	NUMBER EXTRA		CFEE		-1	RATE BASIC FI	
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AULTIPLE DEPENDENT CLAIM I	RESENT					2=		OR	X84=	
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he Highest Number Previously Paid the Highest Number Previously Paid Highest Number Previously Paid	FOR IN THIS	2 COAPE 14 144	- 	r *20.* 🚡	TOTA DOIT. FEE		C	R	TOTAL DIT. FEE	